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PATENT  
Attorney Docket No.: 015631-004810US

on August 4, 2000

By: Paula Henley

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: J. Fernando Bazan

Examiner: Unassigned

Application No.: 09/558,474

Art Unit: 1646

Filed: April 25, 2000

REQUEST FOR CORRECTED FILING  
RECEIPT

For: MAMMALIAN CYTOKINE;  
RELATED AGENTS

Assistant Commissioner for Patents  
Office of Initial Patent Examination  
Customer Service Center  
Washington, D.C. 20231

Sir:

Attached is a copy of the official Filing Receipt received from the Patent and Trademark Office in the above-noted application for which issuance of a corrected filing receipt is respectfully requested.

There is an error in that the Continuing Data as Claimed by the Applicant should read as follows: This Application is a Divisional of the Application No. 09/122,443, filed July 24, 1998, which claimed priority to Provisional Application No. 60/053,765 filed July 25, 1997.

The correction is not due to any error by applicant and no fee is due.

Respectfully submitted,

Karen Babyak Dow

Karen B. Dow  
Reg. No. 29,684

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## FILING RECEIPT



\*OC00000005232853\*


 015631-004810US 14BLOW  
 UNITED STATES DEPARTMENT OF COMMERCE  
 Patent and Trademark Office

 Address: ASSISTANT SECRETARY AND  
 COMMISSIONER OF PATENT AND TRADEMARKS  
 Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/558,474	04/25/2000	1646	690	15631-004810US	-	20	3

 20350  
 TOWNSEND AND TOWNSEND AND CREW LLP  
 TWO EMBARCADERO CENTER  
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 SAN FRANCISCO, CA 94111

Date Mailed: 07/11/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

J. Fernando Bazan, Menlo Park, CA ;

Continuing Data as Claimed by Applicant *This Application is a Divisional of the Application No. 09/122,443, Filed July 24, 1998, which claimed priority of Foreign Applications Provisional Application No. 60/053,765 Filed July 25, 1997.*

If Required, Foreign Filing License Granted 07/11/2000

## Title

Mammalian cytokine; related reagents

## Preliminary Class

435

Data entry by : BARNES, CAROL

Team : OIPE

Date: 07/11/2000


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 & CREW  
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Bib Data Sheet

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JUN 23 2000  
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<b>SERIAL NUMBER</b> 09/558,474	<b>FILING DATE</b> 04/25/2000 <b>RULE</b> -	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 15631-004810JS
<b>APPLICANTS</b> J. Fernando Bazan, Menlo Park, CA ;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/122,443 07/24/1998 PAT 6,060,284 WHICH CLAIMS BENEFIT OF 60/053,765 07/25/1997  <b>** FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA 60053765 07/25/1997				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/11/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> -	<b>TOTAL CLAIMS</b> 20
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 20350				
<b>TITLE</b> Mammalian cytokine; related reagents				
<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	